

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

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

FOR LINE NUMBER: PAGE 275 OF 881

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JANDALI, MAJED, , ,

Mailing Address 3255 PLEASANT LN

City
MOUNT PLEASANT

State
WI

Zip Code
53405-4967

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JANDALI SURGICAL ASSOCIATES

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2017

Transaction ID : SA11A.500135

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JANIGIAN, ROBERT, H., DR., JR.

Mailing Address 131 APPLGATE RD

City
CRANSTON

State
RI

Zip Code
02920-3731

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2017

Transaction ID : SA11A.500014

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAY, JEFFREY, R., , M.D.

Mailing Address 50 FOX RUN LN

City
GREENWICH

State
CT

Zip Code
06831-3737

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GREAT POINT PARTNERS

Occupation (for Individual)
VENTURE CAPITAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2017

Transaction ID : SA11A.491235

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

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

28000.00

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