

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ryan for Congress, Inc.

Full Name (Last, First, Middle Initial)

**A. ANDERSON, PHILMORE, B., MR.,**

Mailing Address 121 BLOOMFIELD RD

City  
CHARLOTTESVILLEState  
VAZip Code  
22903Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB20A.I24805

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANDREWS, BARRY, G., MR.,**

Mailing Address 2730 IRVING BLVD

City  
DALLASState  
TXZip Code  
75207Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

2300.00

Transaction ID : SB20A.I24516

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANDROS, ANN, , ,**

Mailing Address P O BOX 3651

City  
CARMELState  
CAZip Code  
93921Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	8

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB20A.I25119

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5100.00

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