

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

PAGE 1007 OF 1375

<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. HUBBARD, KATHRYN, F., MRS.,				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 5600 SUNSET LN					
City INDIANAPOLIS		State IN	Zip Code 46228		
Purpose of Disbursement CONTRIBUTION REFUND			<input type="checkbox"/>		FEC Identification Number C
Candidate Name			Category/ Type		Amount of Each Disbursement this Period 2700.00
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB20A.I24298	
State:	District:			<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. HUBBARD, SONJA, , ,				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address P.O. BOX 1426					
City TEXARKANA		State TX	Zip Code 75504		
Purpose of Disbursement CONTRIBUTION REFUND			<input type="checkbox"/>		FEC Identification Number C
Candidate Name			Category/ Type		Amount of Each Disbursement this Period 2700.00
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB20A.I24112	
State:	District:			<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. HUBBARD, STANLEY, S., ,				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 3415 UNIVERSITY AVE W					
City SAINT PAUL		State MN	Zip Code 55114		
Purpose of Disbursement CONTRIBUTION REFUND			<input type="checkbox"/>		FEC Identification Number C
Candidate Name			Category/ Type		Amount of Each Disbursement this Period 2700.00
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : SB20A.I24167	
State:	District:			<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional).....▶				8100.00	
TOTAL This Period (last page this line number only).....▶					