

**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 1040 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) <b>A. KIMBERLY, RICHARD, H., MR.,</b>				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 101 CONSTITUTION AVE NW STE 921					
City WASHINGTON		State DC	Zip Code 20001		
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.I23764	
State: District:				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>B. KIMMELMAN, DOUGLAS, W., MR.,</b>				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 130 OVERLEIGH RD					
City BERNARDSVILLE		State NJ	Zip Code 07924		
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.I24960	
State: District:				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>C. KINDER, RICHARD, D., ,</b>				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 2929 LAZY LANE BLVD					
City HOUSTON		State TX	Zip Code 77019		
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.I23937	
State: District:				<input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶				8100.00	
<b>TOTAL</b> This Period (last page this line number only).....▶					