

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse 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. WALL, KATHALEEN, , ,				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address P.O. BOX 667					
City HOUSTON		State TX	Zip Code 77001		FEC Identification Number C
Purpose of Disbursement CONTRIBUTION REFUND			Category/ Type		Amount of Each Disbursement this Period 2300.00
Candidate Name					Transaction ID : SB20A.I23851
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) ▼		<input type="checkbox"/> Memo Item	
State:		District:			
Full Name (Last, First, Middle Initial) B. WALL, KATHALEEN, , ,				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address P.O. BOX 667					
City HOUSTON		State TX	Zip Code 77001		FEC Identification Number C
Purpose of Disbursement CONTRIBUTION REFUND			Category/ Type		Amount of Each Disbursement this Period 400.00
Candidate Name					Transaction ID : SB20A.I24028
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) ▼		<input type="checkbox"/> Memo Item	
State:		District:			
Full Name (Last, First, Middle Initial) C. WALSH, THOMAS, C., ,				Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018	
Mailing Address 10 REBECCA DR.					
City MIDDLETOWN		State NJ	Zip Code 07748		FEC Identification Number C
Purpose of Disbursement CONTRIBUTION REFUND			Category/ Type		Amount of Each Disbursement this Period 2300.00
Candidate Name					Transaction ID : SB20A.I25064
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) ▼		<input type="checkbox"/> Memo Item	
State:		District:			
SUBTOTAL of Disbursements This Page (optional).....▶				5000.00	
TOTAL This Period (last page this line number only).....▶					