

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

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

FOR LINE NUMBER: PAGE 34 OF 196

(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. CHILDEARS, DON, A., MR.,**

Mailing Address 333 S MONROE ST #605

City  
DENVER

State  
CO

Zip Code  
80209-3727

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COLORADO BANKERS ASSN

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 17 / 2018

Transaction ID : SA11A.558373

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**B. CHIPMAN, STEWART, D., ,**

Mailing Address 11042 FOREST LANE NE

City

BAINBRIDGE ISLAND

State

WA

Zip Code

98110-1542

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DYNVAX TECH

Occupation (for Individual)  
CHEMIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2018

Transaction ID : SA11A.558075

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. CHOATE, ARTHUR, B., MR.,**

Mailing Address 1390 S DIXIE HIGHWAY  
STE 2221

City

CORAL GABLES

State

FL

Zip Code

33146-2946

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2018

Transaction ID : SA11A.555997

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3600.00