

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Ryan for Indiana

ADDRESS (number and street)

484 E Carmel Drive PMB #248

Check if different than previously reported. (ACC)

Carmel

IN

46032

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00869115

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

IN

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

02 / 01 / 2024

through

M M / D D / Y Y Y Y

03 / 31 / 2024

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Montgomery, Joe, , ,

Signature of Treasurer

Montgomery, Joe, , ,

Date

M M / D D / Y Y Y Y

04 / 16 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Ryan for Indiana

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="10973.00"/>	<input type="text" value="10973.00"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	<input type="text" value="10973.00"/>	<input type="text" value="10973.00"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="1118.08"/>	<input type="text" value="1118.08"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	<input type="text" value="1118.08"/>	<input type="text" value="1118.08"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="62354.92"/>	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="52500.00"/>	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Ryan for Indiana

Report Covering the Period: From: MM / DD / YYYY 02 / 01 / 2024 To: MM / DD / YYYY 03 / 31 / 2024

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9600.00	9600.00
(ii) Unitemized .....	1373.00	1373.00
(iii) TOTAL of contributions from individuals .....	10973.00	10973.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10973.00	10973.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	52500.00	52500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	52500.00	52500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	63473.00	63473.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1118.08	1118.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1118.08	1118.08

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	63473.00
25. SUBTOTAL (add Line 23 and Line 24).....	63473.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1118.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	62354.92

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 14	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

**A.** Full Name (Last, First, Middle Initial)  
Peterson, Anne, , ,

Mailing Address 12920 Brighton Ln

City Carmel	State IN	Zip Code 46032-9276
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 01 / 2024

**Transaction ID : 2571298**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Conduit total listed in Agg. field	Occupation Conduit total listed in Agg. field
--	--

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3873.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2024

**Transaction ID : 2571298E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Pfenninger, Charlene, , ,

Mailing Address 9025 Dewberry Ct

City Indianapolis	State IN	Zip Code 46260-1527
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2024

**Transaction ID : 2598935**

Amount of Each Receipt this Period  
3300.00

Memo Item

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

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

3800.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 14	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

**A.** Full Name (Last, First, Middle Initial)  
Pfenninger, Fred, , ,

Mailing Address 9025 Dewberry Ct

City Indianapolis	State IN	Zip Code 46260-1527
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2024

**Transaction ID : 2598936**

Amount of Each Receipt this Period  
3300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Pfenninger, Jeffrey, , ,

Mailing Address 14307 Adios Pass

City Carmel	State IN	Zip Code 46032-1107
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Overfuel	Occupation Account Management
------------------------------	----------------------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2024

**Transaction ID : 2571296**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3873.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2024

**Transaction ID : 2571296E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 14	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

**A.** Full Name (Last, First, Middle Initial)  
Phillips, Zachary, , ,

Mailing Address 2079 Kerns Ct

City Carmel	State IN	Zip Code 46280-1569
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FEC ID number of contributing federal political committee. **C**

Name of Employer Cloud Solutions Engineer LLC	Occupation IT Consultant
--	-----------------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2024

**Transaction ID : 2633340**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3873.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2024

**Transaction ID : 2633340E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Pryweller, Jon, , ,

Mailing Address 434 Spring Mill Ln

City Indianapolis	State IN	Zip Code 46260-3527
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FEC ID number of contributing federal political committee. **C**

Name of Employer Whitewater Group	Occupation Accountant
--------------------------------------	--------------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 28 / 2024

**Transaction ID : 2598937**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 14  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

**A.** Full Name (Last, First, Middle Initial)  
Sandock, Debbie, , ,

Mailing Address 13192 Tudor Dr

City Carmel State IN Zip Code 46033-9367

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 15 / 2024

**Transaction ID : 2610755**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3873.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 20 / 2024

**Transaction ID : 2610755E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Turner, Guy, , ,

Mailing Address 505 N Mcclurg Ct

City Chicago State IL Zip Code 60611-5420

FEC ID number of contributing federal political committee. **C**

Name of Employer HPVP Occupation Investor

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 07 / 2024

**Transaction ID : 2571914**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 9 OF 14	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

**A.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3873.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2024

**Transaction ID : 2571914E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Wormser, Barry, , ,

Mailing Address 817 E 57th St

City Indianapolis	State IN	Zip Code 46220-3149
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FEC ID number of contributing federal political committee. **C**

Name of Employer Wormser Casey	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 29 / 2024

**Transaction ID : 2571302**

Amount of Each Receipt this Period  
1000.00

Memo Item

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3873.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2024

**Transaction ID : 2571302E**

Amount of Each Receipt this Period  
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9600.00

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

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

FOR LINE NUMBER: PAGE 10 OF 14  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

**A.** Full Name (Last, First, Middle Initial)  
Pfenninger, Ryan, , ,

Mailing Address 12928 Brighton Ln

City Carmel State IN Zip Code 46032-9276

FEC ID number of contributing federal political committee. **C** H4IN05278

Name of Employer Overfuel, Inc. Occupation CEO

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 15 / 2024

**Transaction ID : 2951921**

Amount of Each Receipt this Period  
2500.00

Memo Item

Candidate Loan

**B.** Full Name (Last, First, Middle Initial)  
Pfenninger, Ryan, , ,

Mailing Address 12928 Brighton Ln

City Carmel State IN Zip Code 46032-9276

FEC ID number of contributing federal political committee. **C** H4IN05278

Name of Employer Overfuel, Inc. Occupation CEO

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
52500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2024

**Transaction ID : 2951942**

Amount of Each Receipt this Period  
50000.00

Memo Item

Candidate Loan

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	52500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	52500.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>			Date of Disbursement MM / DD / YYYY 03 / 06 / 2024
Mailing Address PO Box 441146			FEC Identification Number C C00401224
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 75.78
Purpose of Disbursement Credit card fees		Category/ Type 001	Transaction ID : 500061326
Candidate Name		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>			Date of Disbursement MM / DD / YYYY 03 / 13 / 2024
Mailing Address PO Box 441146			FEC Identification Number C C00401224
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 28.07
Purpose of Disbursement Credit card fees		Category/ Type 001	Transaction ID : 500061327
Candidate Name		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. ACTBLUE</b>			Date of Disbursement MM / DD / YYYY 03 / 20 / 2024
Mailing Address PO Box 441146			FEC Identification Number C C00401224
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Disbursement this Period 33.42
Purpose of Disbursement Credit card fees		Category/ Type 001	Transaction ID : 500061328
Candidate Name		Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	137.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ryan for Indiana**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. ACTBLUE</b>		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2024"/>
Mailing Address PO Box 441146		FEC Identification Number
City West Somerville	State MA	<input type="text" value="C"/> <input type="text" value="C00401224"/>
Zip Code 02144-0031	Purpose of Disbursement Credit card fees	Amount of Each Disbursement this Period
	<input type="text" value="001"/>	<input type="text" value="15.81"/>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : 500061651</b>
Disbursement For: 2024	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. VAN</b>		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2024"/>
Mailing Address 655 15th St NW Ste 650		FEC Identification Number
City Washington	State DC	<input type="text" value="C"/>
Zip Code 20005-5738	Purpose of Disbursement Database	Amount of Each Disbursement this Period
	<input type="text" value="001"/>	<input type="text" value="965.00"/>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : 500061174</b>
Disbursement For: 2024	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C.</b>		<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>
Mailing Address		FEC Identification Number
City	State	<input type="text" value="C"/>
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
	<input type="text" value=""/>	<input type="text" value=""/>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="980.81"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="1118.08"/>

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) Transaction ID : 2951921L  
 Ryan for Indiana

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2024
Pfenninger, Ryan, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 12928 Brighton Ln		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Carmel	State IN	ZIP Code 46032-9276
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2500.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	02 / 15 / 2024	No due date	0.00% % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	2500.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : 2951942L**  
 Ryan for Indiana

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2024
Pfenninger, Ryan, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 12928 Brighton Ln		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Carmel	State IN	ZIP Code 46032-9276
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 29 / 2024	M M / D D / Y Y Y Y No Due Date	0.00% % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	50000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	52500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.