

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 643
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMES N. STANARD
Full Name (Last, First, Middle Initial)

Mailing Address 570 S SPOONBILL DR

City SARASOTA State FL Zip Code 34236-1820

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : SA11.306555

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

REFUNDED \$100,000.00 ON 03/11/2016

B. JANET G. STANARD
Full Name (Last, First, Middle Initial)

Mailing Address 570 S SPOONBILL DR

City SARASOTA State FL Zip Code 34236-1820

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2016

Transaction ID : SA11.297538

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. DR. RICHARD STARK M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 915 EAST EAGLE LAKE DR.

City KALAMAZOO State MI Zip Code 49009-8426

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

Name of Employer BRONSON OUTPATIENT SURGERY Occupation ANESTHESIOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11.308221

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125250.00
TOTAL This Period (last page this line number only).....	