

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 2079 OF 6270

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Ryan for Congress, Inc.**

Full Name (Last, First, Middle Initial)

**MS. DIANE FLAHERTY**Mailing Address **P.O. BOX 763**

City

**WINTERS**

State

**CA**

Zip Code

**95694-0763**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**SELF**Occupation  
**HORSE FARM OWNER/MANAGER**

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1500.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2016

**Transaction ID : SA11A.325601**

Amount of Each Receipt this Period

**1500.00**
☐ Memo Item  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)

**JOANNE M. FLATEN**Mailing Address **1823 W VINE STREET**

City

**EAU CLAIRE**

State

**WI**

Zip Code

**54703-4869**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**RETIRED**Occupation  
**RETIRED**

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**50.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2016

**Transaction ID : SA11A.324940**

Amount of Each Receipt this Period

**25.00**
☐ Memo Item  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)

**DR. KENNETH MARSHALL FLORY M.D.**Mailing Address **1200 MONTCLAIR STREET**

City

**LONGVIEW**

State

**TX**

Zip Code

**75601-3564**FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**GOOD SHEPARD PHYSICIAN NETWORK**Occupation  
**PHYSICIAN**

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1500.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2016

**Transaction ID : SA11A.325598**

Amount of Each Receipt this Period

**1000.00**
☐ Memo Item  
**CONTRIBUTION**
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**2525.00**