

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

Ryan for Congress

ADDRESS (number and street)  
▼

P. O. Box 1919

☐Check if different  
than previously  
reported. (ACC)

Janesville

WI

53547

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00330894

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

WI

1

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

in the  
State of

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

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2006

through

03

31

2006

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

Larry E. Everhart

Signature of Treasurer

Electronically Filed by Larry E. Everhart

Date

04

11

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Ryan for Congress

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 6

	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)).....	64632.39	745053.57
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	64632.39	744503.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	69922.03	405582.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2069.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	69922.03	403513.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1531891.48	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	6530.98	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Ryan for Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

19053.35

271591.30

(ii) Unitemized.....

15247.39

110879.72

(iii) TOTAL of contributions

34300.74

382471.02

from individuals..... ►

21.65

203.15

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

30310.00

362379.40

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS  
(other than loans)

64632.39

745053.57

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING  
EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

2069.75

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

16790.90

37861.36

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ►

81423.29

784984.68

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	69922.03	405582.98
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	550.00
(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	550.00
21. OTHER DISBURSEMENTS.....	2450.00	2450.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	72372.03	408582.98

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1522840.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	81423.29
25. SUBTOTAL (add Line 23 and Line 24).....	1604263.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72372.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1531891.48

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

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

FOR LINE NUMBER: PAGE 5 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

David Baum

Mailing Address P.O. Box 386

City State Zip Code  
 Janesville WI 53547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SSI Inc.

Occupation  
Chair

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 6

Transaction ID: 60407.C36862

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Mildred Tait

Mailing Address 227 Garfield Ave.

City State Zip Code  
 Evansville WI 53536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 3 1 / 2 0 0 6

Transaction ID: 60407.C36468

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Bob Ozburn

Mailing Address 133 S. Garfield Ave.

City State Zip Code  
 Janesville WI 53545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 4 / 2 0 0 6

Transaction ID: 60407.C36601

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

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

FOR LINE NUMBER: PAGE 6 / 85

(check only one)

<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 Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Jacobs Mailing Address 524 Apache Dr. City Janesville State WI Zip Code 53545 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60407.C36802 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	7	/	2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	2	/	1	7	/	2	0	0	6														
250.00																							
<b>B.</b> Full Name (Last, First, Middle Initial) Hiram M. Nowlan Mailing Address 1903 Eastwood Ave. City Janesville State WI Zip Code 53545 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60407.C36882 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	0	/	2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	2	0	/	2	0	0	6														
100.00																							
<b>C.</b> Full Name (Last, First, Middle Initial) Donald Hill Mailing Address 409 Circle Dr. City Lake Geneva State WI Zip Code 53147 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60407.C36474 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	4	/	2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	2	/	0	4	/	2	0	0	6														
50.00																							
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<table border="1"> <tr> <td>400.00</td> </tr> </table>	400.00																				
400.00																							
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<table border="1"> <tr> <td></td> </tr> </table>																					

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

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

FOR LINE NUMBER: PAGE 7 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Hill		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 6
Mailing Address 409 Circle Dr.		<b>Transaction ID:</b> 60407.C36907
City Lake Geneva	State WI	Zip Code 53147
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 235.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Bonnie Obernberger		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 6
Mailing Address 5927 Quaker Hill Rd.		<b>Transaction ID:</b> 60407.C36973
City Racine	State WI	Zip Code 53406
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Creative Ins Planning	Occupation Bookkeeper	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Jeri Cushman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 6
Mailing Address 3831 Lighthouse Dr.		<b>Transaction ID:</b> 60407.C36964
City Racine	State WI	Zip Code 53402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

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

385.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Susanne Gardiner

Mailing Address 7800 144th Ave.

City State Zip Code  
 Bristol WI 53104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Trans-Chemco Inc.

Occupation  
owners

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 6 / 2 0 0 6

Transaction ID: 60407.C36539

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Thomas Niebler

Mailing Address 68 N. Johnson St.

City State Zip Code  
 Hartford WI 53027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
ELECTRONIC TECH

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 0 / 2 0 0 6

Transaction ID: 60407.C36660

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Thomas Niebler

Mailing Address 68 N. Johnson St.

City State Zip Code  
 Hartford WI 53027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
ELECTRONIC TECH

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 8 / 2 0 0 6

Transaction ID: 60407.C36948

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

350.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Verne Read

Mailing Address 312 E Wisconsin Ave.  
Suite 402

City State Zip Code  
Milwaukee WI 53201-0323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 60407.C36753

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. John Koss

Mailing Address 1492 W. Calumet Ct.

City State Zip Code  
River Hills WI 53217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Koss Corporation

Occupation  
Chairman

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 0 6

Transaction ID: 60407.C36695

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Glenn Langer

Mailing Address 1735 Wedgewood Dr. W.

City State Zip Code  
Elm Grove WI 53122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Langer Roofing

Occupation  
Estimator

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 7 / 2 0 0 6

Transaction ID: 60407.C36338

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Rex Lowe Mailing Address 2105 Woodruff Blvd. City Janesville State WI Zip Code 53545 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60407.C36624 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Judy Baum Mailing Address 2727 River Bluff Dr. City Janesville State WI Zip Code 53545 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Housewife Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 16 / 2006 <b>Transaction ID:</b> 60407.C36863 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Hanson Mailing Address 4015 W. Canterbury Ct. City Thiensville State WI Zip Code 53092 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Joy Global Inc Occupation Manager Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		Date of Receipt MM / DD / YYYY 03 / 17 / 2006 <b>Transaction ID:</b> 60407.C36893 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1525.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Walter Kolb

Mailing Address 1703 Pearl St.

City State Zip Code  
Waukesha WI 53186

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Audio Implements

Occupation  
Self Employed

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

02 / 07 / 2006

Transaction ID: 60407.C36670

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

William Ring

Mailing Address 1744 Hillcrest Dr.

City State Zip Code  
Lake Geneva WI 53147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dales Motors, Inc

Occupation  
Sales

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

03 / 31 / 2006

Transaction ID: 60407.C36999

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Earl Richter

Mailing Address 333 Lake Avenue #304

City State Zip Code  
Racine WI 53403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

02 / 11 / 2006

Transaction ID: 60407.C36687

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

**A.** Full Name (Last, First, Middle Initial)  
Earl Richter  
Mailing Address 333 Lake Avenue #304

City State Zip Code  
Racine WI 53403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 6

Transaction ID: 60407.C36927

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Bernard Van Dinter  
Mailing Address 8081 Fielding Lane

City State Zip Code  
Greendale WI 53129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 8 / 2 0 0 6

Transaction ID: 60407.C36655

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Richard Bushey  
Mailing Address 1596 38th Ave.

City State Zip Code  
Kenosha WI 53144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Expanded Tech Corp

Occupation  
Owner

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 1 / 2 0 0 6

Transaction ID: 60407.C36386

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 85

(check only one)

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Malcolm Hatfield Mailing Address 6937 Brook Rd. City State Zip Code Franksville WI 53126 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Racine Radiology Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36617 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) A. Genevieve Anderson Mailing Address 126 S. Harmony Dr. City State Zip Code Janesville WI 53545 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36360 Amount of Each Receipt this Period 50.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Chuck Everhart Mailing Address 4108 Wilshire Ln. City State Zip Code Janesville WI 53546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36584 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Roller Mailing Address 1550 Greenway Terrace City Elm Grove State WI Zip Code 53122-1611 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Miller Brands Occupation Beer Wholesaler Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 03 / 2006 <b>Transaction ID:</b> 60407.C36563 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Lee Palmer Mailing Address N29 W29682 Franciscan Rd. City Pewaukee State WI Zip Code 53072 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Automatic Fire Protection Occupation Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		Date of Receipt MM / DD / YYYY 02 / 23 / 2006 <b>Transaction ID:</b> 60407.C36814 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) George Kiskunas Mailing Address 3905 Parkview Dr. City Janesville State WI Zip Code 53546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Virchow, Krause & Company Occupation Partner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 17 / 2006 <b>Transaction ID:</b> 60407.C36795 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Niall Power		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 23 Lakewood Dr.		<b>Transaction ID:</b> 60407.C36710
City Racine	State WI	Zip Code 53402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Info. Requested 04/21/20-04 Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Info. requested 04/21/2004 Election Cycle-to-Date ▼ 200.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Virginia Adams		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 22 S. Garfield Ave.		<b>Transaction ID:</b> 60407.C36813
City Janesville	State WI	Zip Code 53545
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Adams & Sons, LTD. Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Self-Employed Election Cycle-to-Date ▼ 200.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Eugenia Jacobus		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 1 / 2 0 0 6
Mailing Address 14240 Hillside Rd.		<b>Transaction ID:</b> 60407.C36729
City Elm Grove	State WI	Zip Code 53122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Election Cycle-to-Date ▼ 600.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

650.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Shea Mailing Address 1827 Pine Ridge Dr. City Janesville State WI Zip Code 53545 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Schwartz & Shea Occupation Insurance Agent Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36937 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) R. Douglas Ziegler Mailing Address 5409 German Village Rd. City West Bend State WI Zip Code 53095 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer B.C. Ziegler & Co. Occupation portfolio mgr. Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36512 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Vito Colano Mailing Address 414 S. 1st St. City Waterford State WI Zip Code 53185 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36772 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

225.00

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



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

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy Lee Koss Mailing Address 1492 W. Calumet Ct. City River Hills State WI Zip Code 53217 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 09 / 2006 <b>Transaction ID:</b> 60407.C36696 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Wiederhold Mailing Address 805 Park Lane City Elm Grove State WI Zip Code 53122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Managed Health Serv. Inc. Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		Date of Receipt MM / DD / YYYY 02 / 25 / 2006 <b>Transaction ID:</b> 60407.C36818 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Emily Peterson Mailing Address 2934 Tracy Ln. City Stoughton State WI Zip Code 53589 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00		Date of Receipt MM / DD / YYYY 02 / 05 / 2006 <b>Transaction ID:</b> 60407.C36608 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Emily Peterson

Mailing Address 2934 Tracy Ln.

City State Zip Code  
Stoughton WI 53589

FEC ID number of contributing federal political committee.

C

Name of Employer  
retiredOccupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2006

Transaction ID: 60407.C36960

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

Charles Patton

Mailing Address 25 S. Vincennes Cir.

City State Zip Code  
Racine WI 53402

FEC ID number of contributing federal political committee.

C

Name of Employer  
retiredOccupation  
Retired M.D.

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 15 2006

Transaction ID: 60407.C36708

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

Nancy Mistele

Mailing Address 5106 Reynolds Ave.

City State Zip Code  
Waunakee WI 53597

FEC ID number of contributing federal political committee.

C

Name of Employer  
Business OwnerOccupation  
Self-Employed

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 01 2006

Transaction ID: 60407.C36374

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Fran Wagner Mailing Address 5743 Island View Ct. City State Zip Code Waterford WI 53185 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Citizens Bank of Mukwanago Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36847 Amount of Each Receipt this Period 100.00 <b>Earmarked(Receipt)</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Alliance Of Bankers For Wiscon Mailing Address PO BOX 8880 City State Zip Code Madison WI 53708 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> CM63360407.C36847 Amount of Each Receipt this Period 100.00 <b>Memo - Conduit memo total</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> <b>Earmarked Memo - Conduit total</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Guy Ladd Mailing Address 5712 Prairie Ridge Dr. City State Zip Code Racine WI 53406 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Reprographic Technologies Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36831 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		350.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER: PAGE 20 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. John Francisco

Mailing Address 811 W. Cardinal Circle

City State Zip Code  
 Oak Creek WI 53154

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self employedOccupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 60407.C36816

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Richard Hathway

Mailing Address 1800 Kensington Dr. Apt..A302

City State Zip Code  
 Waukesha WI 53188

FEC ID number of contributing federal political committee.

C

Name of Employer  
retiredOccupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 1 / 2 0 0 6

Transaction ID: 60407.C36760

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mary Jane Berenz

Mailing Address 675 Kettle Ridge

City State Zip Code  
 Colgate WI 53017

FEC ID number of contributing federal political committee.

C

Name of Employer  
Bernz Pkg. Corp.Occupation  
Business Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 6

Transaction ID: 60407.C36849

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

175.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Susan Kemnitz

Mailing Address 3733 Nagawicka Rd.

City State Zip Code  
Hartland WI 53029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested 4/27/00

Occupation  
Information Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 0 6

Transaction ID: 60407.C36768

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Gary Grunau

Mailing Address 929 N. Astor Apt. 1901

City State Zip Code  
Milwaukee WI 53202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grunau Group

Occupation  
Executive

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: 60407.C36728

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

John Frahm

Mailing Address 6520 Mariner Dr. #103

City State Zip Code  
Racine WI 53406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60407.C36603

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

**A.** Full Name (Last, First, Middle Initial)  
Marilyn Mooney  
Mailing Address N57W30590 Stevens Road

City State Zip Code  
Hartland WI 53029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MLG Commercial, Inc.

Occupation  
Principal

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60407.C36872

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Francis McCumber  
Mailing Address 2433 N Wright Road

City State Zip Code  
Janesville WI 53546

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
150.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60407.C36553

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Francis McCumber  
Mailing Address 2433 N Wright Road

City State Zip Code  
Janesville WI 53546

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 60407.C36989

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Cindi Broydrick		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 7 / 2 0 0 6	
Mailing Address 221 Bamboo Rd		<b>Transaction ID:</b> 60407.C36434	
City West Palm Beach	State FL	Amount of Each Receipt this Period 435.35	
Zip Code 33404		<b>In-Kind</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼ 435.35	
Name of Employer Broydrick and Assoc.		Occupation Consultant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 435.35	

<b>B.</b> Full Name (Last, First, Middle Initial) Russell Johnson		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address 10109 N. State Road HWY 26		<b>Transaction ID:</b> 60407.C36614	
City Milton	State WI	Amount of Each Receipt this Period 50.00	
Zip Code 53563		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼ 165.00	
Name of Employer retired		Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 50.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Russell Johnson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 8 / 2 0 0 6	
Mailing Address 10109 N. State Road HWY 26		<b>Transaction ID:</b> 60407.C36950	
City Milton	State WI	Amount of Each Receipt this Period 50.00	
Zip Code 53563		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼ 215.00	
Name of Employer retired		Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 50.00	

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

535.35

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

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

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

FOR LINE NUMBER: PAGE 24 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Edwin Mathews

Mailing Address W6212 Hwy. 12

City State Zip Code  
 Whitewater WI 53190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 8 / 2 0 0 6

Transaction ID: 60407.C36984

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

David Torgler

Mailing Address 249 N Kendrick Avenue

City State Zip Code  
 Burlington WI 53105-1149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Burlington

Occupation  
City Administrator

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 5 / 2 0 0 6

Transaction ID: 60407.C36538

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Gary Messner

Mailing Address 1610 Range Trail  
DO NOT CALL

City State Zip Code  
 Verona WI 53593

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Messner Inc.

Occupation  
Semi-Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 7 / 2 0 0 6

Transaction ID: 60407.C36583

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Arleen Koenigs

Mailing Address W 136 N7707 N. Hills Dr.

City State Zip Code  
 Menomonee Falls WI 53051

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 3 / 2 0 0 6

Transaction ID: 60407.C36476

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Edward Napoleon

Mailing Address 929 N. Astor Unit 1504

City State Zip Code  
 Milwaukee WI 53202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 8 / 2 0 0 6

Transaction ID: 60407.C36734

Amount of Each Receipt this Period

75.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Roger Kriete

Mailing Address 4444 W. Blue Mound Rd.

City State Zip Code  
 Milwaukee WI 53208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Milwaukee Mac Sales

Occupation  
Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 7 / 2 0 0 6

Transaction ID: 60407.C36632

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

425.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Mailing Address 1106 57th Street

City State Zip Code  
Kenosha WI 53140-4026

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-employedOccupation  
Real Estate

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 6

Transaction ID: 60407.C36892

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Toby Steivang

Mailing Address N 2013 N. Lake Shore Dr.

City State Zip Code  
Fontana WI 53125

FEC ID number of contributing federal political committee.

C

Name of Employer  
Walworth State BankOccupation  
Banker

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 4 / 2 0 0 6

Transaction ID: 60407.C36756

Amount of Each Receipt this Period

500.00

Earmarked(Receipt)

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Coalition For Community Bankin

Mailing Address 7818 Big Sky Dr.  
S

City State Zip Code  
Madison WI 53719

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼  
 Other

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 4 / 2 0 0 6

Transaction ID: CM63460407.C36756

Amount of Each Receipt this Period

500.00

Memo - Conduit memo total

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Earmarked Memo - Conduit total

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Duane Bluemke

Mailing Address 4585 Hewitts Point Rd.

City State Zip Code  
Oconomowoc WI 53066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
U.S.Counseling Services,  
Inc.

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60407.C36588

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

David Ladd

Mailing Address 1409 State Rd. 23

City State Zip Code  
Dodgeville WI 53533

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Walnut Hollow

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 6

Transaction ID: 60407.C36920

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Magda Sutherland

Mailing Address 8501 Old Sauk Rd. Apt. 223

City State Zip Code  
Middleton WI 53562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60407.C36511

Amount of Each Receipt this Period

70.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

420.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Magda Sutherland

Mailing Address 8501 Old Sauk Rd. Apt. 223

City State Zip Code  
 Middleton WI 53562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 0 6

Transaction ID: 60407.C36934

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Rodney Kittelsen

Mailing Address 708 - 26th Ave.

City State Zip Code  
 Monroe WI 53566

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kittelsen Law Firm

Occupation  
Lawyer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 1 / 2 0 0 6

Transaction ID: 60407.C36730

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Verona Matheys

Mailing Address 12900 Blythe Rd.

City State Zip Code  
 Brookfield WI 53005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

170.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 8 / 2 0 0 6

Transaction ID: 60407.C36625

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

175.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Verona Matheys

Mailing Address 12900 Blythe Rd.

City State Zip Code  
 Brookfield WI 53005

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: 60407.C36995

Amount of Each Receipt this Period

35.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Norman Friske

Mailing Address 2947 S. Lenox Street

City State Zip Code  
 Milwaukee WI 53207

FEC ID number of contributing federal political committee.

C

Name of Employer retired

Occupation Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 1 1 / 2 0 0 6

Transaction ID: 60407.C36677

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Norman Friske

Mailing Address 2947 S. Lenox Street

City State Zip Code  
 Milwaukee WI 53207

FEC ID number of contributing federal political committee.

C

Name of Employer retired

Occupation Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 0 6

Transaction ID: 60407.C36926

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

135.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Rau		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address 3876 S Oakbrook Drive		<b>Transaction ID:</b> 60407.C36833
City Greenfield	State WI	Zip Code 53228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Clement Manor Inc.	Occupation Health Care Adm.	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Michael J. Tobin		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 8 / 2 0 0 6
Mailing Address 4034 S. 117th Street		<b>Transaction ID:</b> 60407.C36883
City Greenfield	State WI	Zip Code 53228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Star Packing Supplies Co.	Occupation Small Business Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Keith R. Johnson		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 4230 - 95th Street		<b>Transaction ID:</b> 60407.C36761
City Pleasant Prairie	State WI	Zip Code 53158
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ITT	Occupation General Manager	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Cavagnaro Mailing Address 12415 Walnut Road City Elm Grove State WI Zip Code 53122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36922 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Oscar Mayer Mailing Address One South Pickney Street City Madison State WI Zip Code 53703 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired -Oscar Meyer Inc. Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36975 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Earl Schiefelbein Mailing Address 1700 S. River Rd. Apt. 263 City Janesville State WI Zip Code 53546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 360.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 <b>Transaction ID:</b> 60407.C36688 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

625.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Earl Schiefelbein

Mailing Address 1700 S. River Rd. Apt. 263

City State Zip Code  
 Janesville WI 53546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 8 / 2 0 0 6

Transaction ID: 60407.C36982

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Marian Quade

Mailing Address 2722 22nd Avenue

City State Zip Code  
 Monroe WI 53566-3626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60407.C36711

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Stephen Brenton

Mailing Address 8567 Arbor Trace Drive

City State Zip Code  
 Verona WI 53593

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WI Hospital Assoc.

Occupation  
President

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 6

Transaction ID: 60407.C36639

Amount of Each Receipt this Period

150.00

Earmarked(Receipt)

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

425.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Wisconsin Hospital Assn. HEALT

Mailing Address 5510 RESEARCH PARK DRIVE

City State Zip Code  
 Madison WI 53725

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006

☐ Primary ☐ General  
☒ Other (specify) ▼  
 Other

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 6

Transaction ID: CM63560407.C36639

Amount of Each Receipt this Period

150.00

Memo - Conduit memo total

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Earmarked Memo - Conduit  
total

Full Name (Last, First, Middle Initial)

B. Ed Gill

Mailing Address 8814 - 46th Ave.

City State Zip Code  
 Kenosha WI 53142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jockey

Occupation  
Excutive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: 60407.C36955

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Sylvia Lego

Mailing Address 7 S. Ringold St.

City State Zip Code  
 Janesville WI 53545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 2 / 2 0 0 6

Transaction ID: 60407.C36836

Amount of Each Receipt this Period

78.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

178.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

**A.** Full Name (Last, First, Middle Initial)  
 Everett Roehl  
 Mailing Address 11574 N. Galvin Ave.

City State Zip Code  
 Marshfield WI 54449

FEC ID number of contributing federal political committee.

C

Name of Employer  
Roehl Transport, Inc.Occupation  
Trucking

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 0 6

Transaction ID: 60407.C36919

Amount of Each Receipt this Period

600.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 Elaine Worzella  
 Mailing Address 4560 W. Hunting Park Drive

City State Zip Code  
 Franklin WI 53132

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 2 / 2 0 0 6

Transaction ID: 60407.C36407

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 Steven J. Schultz  
 Mailing Address S55 W34095 Hwy. ZZ

City State Zip Code  
 North Prairie WI 53153

FEC ID number of contributing federal political committee.

C

Name of Employer  
retiredOccupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 6 / 2 0 0 6

Transaction ID: 60407.C36827

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Dean Fitzgerald

Mailing Address 1200 W Sierra Lane

City State Zip Code  
Meguon WI 53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Capitol Service

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

01 / 06 / 2006

Transaction ID: 60407.C36353

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Dean Fitzgerald

Mailing Address 1200 W Sierra Lane

City State Zip Code  
Meguon WI 53092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Capitol Service

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

02 / 09 / 2006

Transaction ID: 60407.C36659

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Marvin R. Humphrey

Mailing Address W3310 Mc Donald Rd.

City State Zip Code  
Lake Geneva WI 53147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Stuart Tank Sales

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

175.00

Date of Receipt

02 / 04 / 2006

Transaction ID: 60407.C36475

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 36 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

**A.** Full Name (Last, First, Middle Initial)  
Marvin R. Humphrey  
Mailing Address W3310 Mc Donald Rd.

City State Zip Code  
Lake Geneva WI 53147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stuart Tank Sales

Occupation  
President

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: 60407.C36967

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Betty-Alice Anderson  
Mailing Address 31745 W. Muscovy Road

City State Zip Code  
Hartland WI 53029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 0 6

Transaction ID: 60407.C36869

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Glenn Loomis  
Mailing Address 2957 Dartmouth Drive

City State Zip Code  
Janesville WI 53545

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mercy Health Systems

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 5 / 2 0 0 6

Transaction ID: 60407.C36623

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

250.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. John A. Butler

Mailing Address 1005 Augusta Ave.

City State Zip Code  
Wausau WI 54403

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 0 6

Transaction ID: 60407.C36586

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. William Sauey

Mailing Address 2129 Capestone St.

City State Zip Code  
Las Vegas NV 89134

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 2 / 2 0 0 6

Transaction ID: 60407.C36383

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. William Sauey

Mailing Address 2129 Capestone St.

City State Zip Code  
Las Vegas NV 89134

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 6

Transaction ID: 60407.C36889

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Stacy Mays

Mailing Address 12525 N. La Belle Ct.

City State Zip Code  
 Mequon WI 53092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 0 8 / 2 0 0 6

Transaction ID: 60407.C36693

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Malcolm Miller

Mailing Address P.O. Box 37

City State Zip Code  
 Walworth WI 53184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walworth Foundries

Occupation  
Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 0 3 / 2 0 0 6

Transaction ID: 60407.C36465

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Malcolm Miller

Mailing Address P.O. Box 37

City State Zip Code  
 Walworth WI 53184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walworth Foundries

Occupation  
Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: 60407.C36966

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Mailing Address 5620 College Point Ct.

City State Zip Code  
 Racine WI 53402

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 8 / 2 0 0 6

Transaction ID: 60407.C36662

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5299 Lakeside Drive

City State Zip Code  
 Greendale WI 53129

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: 60407.C36913

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 112 W Maple Street

City State Zip Code  
 Silver Lake WI 53170

FEC ID number of contributing federal political committee.

C

Name of Employer  
WS PACKAGINGOccupation  
President

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 6

Transaction ID: 60407.C36665

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Rexford Titus Mailing Address 345 WOODLAND LANE City Oconomowoc State WI Zip Code 53066 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PROHEALTH CARD Occupation HEALTHCARE EXEC Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60407.C36567 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mary Krall Mailing Address PO Box 265 City Rochester State WI Zip Code 53167 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 25 / 2006 <b>Transaction ID:</b> 60407.C36962 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Weber Smith Mailing Address 400 FARWELL DRIVE City Madison State WI Zip Code 53704 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer retired Occupation Information Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 24 / 2006 <b>Transaction ID:</b> 60407.C36916 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Steven Fettig

Mailing Address N 3620 OAK HILL STREET

City State Zip Code  
 Delavan WI 53115-3111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 0 6 / 2 0 0 6

Transaction ID: 60407.C36339

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Blanche Dvorak

Mailing Address 8418 15TH AVENUE

City State Zip Code  
 Kenosha WI 53143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: 60407.C36972

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

250.00

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

19053.35

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

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

FOR LINE NUMBER: PAGE 42 / 85

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Abbott Lab PAC - Employees (AEPAC)

Mailing Address 100 Abbott Park Rd.

City State Zip Code  
 Abbott Park IL 60064

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: 60407.C36976

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. UPSPAC (United Parcel Service)

Mailing Address 55 Glenlake Parkway N.E.

City State Zip Code  
 Atlanta GA 30328

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 1 3 / 2 0 0 6

Transaction ID: 60407.C36663

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. KOCH PAC

Mailing Address 1450 G. St. N.W.  
Suite 445

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 0 6

Transaction ID: 60407.C36977

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 85

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** National Venture Capital Assn. PAC

Mailing Address 1655 N. Fort Myer Dr.  
Ste. 850

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 6

Transaction ID: 60407.C36868

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** International Union Of Operating Enginee

Mailing Address 1125 17th St. N.W.

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 6

Transaction ID: 60407.C36898

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Northwestern Mutual Life Federal PAC

Mailing Address 720 E. Wisconsin Ave.

City State Zip Code  
Milwaukee WI 53202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 60407.C36978

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 85

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Wells Fargo Employee Pac

Mailing Address Norwest Center 6th &amp; Marquette

City State Zip Code  
 Minneapolis MN 55479-1032

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: 60407.C36890

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Realtors PAC (RPAC)

Mailing Address 430 N. Michigan Ave.

City State Zip Code  
 Chicago IL 60611

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 2 5 / 2 0 0 6

Transaction ID: 60407.C36432

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Federation of Am. Hospitals (FED PAC)

Mailing Address 801 Pennsylvania Ave., NM  
Ste 245

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: 60407.C36979

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

5500.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 85

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Emerson Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 6	
Mailing Address 700 - 13th St. N.W. Suite 700		<b>Transaction ID:</b> 60407.C36891	
City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Build PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6	
Mailing Address 1201 15th Street, NW		<b>Transaction ID:</b> 60407.C36415	
City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) OpPAC (OppenheimerFunds)		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 7 / 2 0 0 6	
Mailing Address 498 7th Avenue., 10th Fl.		<b>Transaction ID:</b> 60407.C36401	
City New York	State NY	Zip Code 10018	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 85

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

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

Fraternity & Sorority Pac

Mailing Address PO BOX 50731

City State Zip Code  
 Washington DC 20091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☐ General  
☒ Other (specify) ▼  
 General 2006

Election Cycle-to-Date ▼

9000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: 60407.C36980

Amount of Each Receipt this Period

4000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

AICPA Political Action Committee

Mailing Address 1455 Pennsylvania Avenue NW

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 7 / 2 0 0 6

Transaction ID: 60407.C36396

Amount of Each Receipt this Period

310.00

In-Kind

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Breakfast food

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

SIEBEL PAC

Mailing Address 2207 BRIDGEPOINTE PARKWAY

City State Zip Code  
 San Mateo CA 94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 2 0 / 2 0 0 6

Transaction ID: 60407.C36427

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

9310.00

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

30310.00

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

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

FOR LINE NUMBER: PAGE 47 / 85

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

**A.** Full Name (Last, First, Middle Initial)  
National Republican Congressional Commit

Mailing Address 320 First St., S.E.

City State Zip Code  
 Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21.65

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60411.C37007

Amount of Each Receipt this Period

21.65

In-Kind

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

21.65

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

21.65

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

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

FOR LINE NUMBER: PAGE 48 / 85

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Chase Bank (Bank One JANESVILLE)

Mailing Address 100 W. Milwaukee St.

City State Zip Code  
 Janesville WI 53545-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14936.95

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60407.C37006

Amount of Each Receipt this Period

5404.34

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Anchor Bank JANESVILLE

Mailing Address 2215 Holiday Drive

City State Zip Code  
 Janesville WI 53545-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18321.47

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60407.C37005

Amount of Each Receipt this Period

6783.62

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Anchor Bank JANESVILLE

Mailing Address 2215 Holiday Drive

City State Zip Code  
 Janesville WI 53545-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

22924.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60407.C37004

Amount of Each Receipt this Period

4602.94

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

16790.90

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

16790.90



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 First Street., S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
D.C. Campaign Lunch Expense

Candidate Name

007  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2848

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	0	6

Amount of Each Disbursement this Period

97.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53D.C. CAMPAIGN LUNCH EXPEN-  
SE

Full Name (Last, First, Middle Initial)

**B. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Payroll taxes

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2937

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	6

Amount of Each Disbursement this Period

1119.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**C. Postmaster JANESVILLE, WI 53545**

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
BRM Deposit

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2869

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	6

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

BRM DEPOSIT

SUBTOTAL of Disbursements This Page (optional) .....

1417.01

TOTAL 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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Merch serv Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2935

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

34.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCH SERV FEE

Full Name (Last, First, Middle Initial)

## **B. Paul Ryan**

Mailing Address P.O. Box 2194

City Janesville State WI Zip Code 53547-

Purpose of Disbursement

Plane Tickets to Retreat - see

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2874

Date of Disbursement

02 / 17 / 2006

Amount of Each Disbursement this Period

1306.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PLANE TICKETS TO RETREAT -  
SEE

Full Name (Last, First, Middle Initial)

## **C. SCM Associates, Inc.**

Mailing Address 10 Main Street, P.O. Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement

Direct Mail Fundraising

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2877

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

3921.46

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

DIRECT MAIL FUNDRAISING

**SUBTOTAL** of Disbursements This Page (optional) .....

5262.41

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Best Buy Co. Inc**

Mailing Address P.O. Box 9312

City Minneapolis State MN Zip Code 55423-

Purpose of Disbursement

Printer Ink

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2925

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

76.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTER INK

Full Name (Last, First, Middle Initial)

## **B. Elaine Knowles**

Mailing Address 1717 Wesley Ave.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2908

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

5.48

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. Susan Jacobson**

Mailing Address 3544 N. Cedar Ridge Court

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Sarlary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2917

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

2205.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SARLARY

**SUBTOTAL** of Disbursements This Page (optional) .....

2287.54

**TOTAL** 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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Postmaster JANESVILLE, WI 53545

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
 PO Box Renewal

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2933

Date of Disbursement

03 / 30 / 2006

Amount of Each Disbursement this Period

132.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

PO BOX RENEWAL

Full Name (Last, First, Middle Initial)

**B.** Congressional Institute, Inc.

Mailing Address 401 Whyte St. Suite 103

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
 Republican Training Retreat

Candidate Name

002  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2855

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

2708.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

REPUBLICAN TRAINING RETRE-  
 AT

Full Name (Last, First, Middle Initial)

**C.** Paul Ryan

Mailing Address P.O. Box 2194

City Janesville State WI Zip Code 53547-

Purpose of Disbursement  
 Reimbursement for travel -see

Candidate Name

002  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2928

Date of Disbursement

03 / 22 / 2006

Amount of Each Disbursement this Period

1497.01

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

REIMBURSEMENT FOR TRAVEL -  
 SEE

**SUBTOTAL** of Disbursements This Page (optional) .....

4337.01

**TOTAL** 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. TDS Metrocom**

Mailing Address PO Box 1019

City Monroe State WI Zip Code 53566-

Purpose of Disbursement

Phone Bill

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2817

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	0	6

Amount of Each Disbursement this Period

68.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE BILL

Full Name (Last, First, Middle Initial)

**B. Susan Jacobson**

Mailing Address 3544 N. Cedar Ridge Court

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2880

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	6

Amount of Each Disbursement this Period

2205.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

**C. Davis & Kuelthau, S.C.**

Mailing Address 111 E Kilbourn, Suite 1400

City Milwaukee State WI Zip Code 53202-

Purpose of Disbursement

Legal Consultation

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2816

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	0	6

Amount of Each Disbursement this Period

240.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

LEGAL CONSULTATION

SUBTOTAL of Disbursements This Page (optional) .....

2514.26

TOTAL 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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

<b>A. Paul Ryan</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2194 City Janesville State WI Zip Code 53547- Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2872</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 48.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL</b>
<b>B. Paul Ryan</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2194 City Janesville State WI Zip Code 53547- Purpose of Disbursement Campaign dinner expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2823</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 132.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CAMPAIGN DINNER EXPENSE</b>
<b>C. Payroll Data Services, LLC</b> Full Name (Last, First, Middle Initial) Mailing Address 2418 Cross Roads Dr. City Madison State WI Zip Code 53704- Purpose of Disbursement Payroll processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2820</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 42.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PAYROLL PROCESSING FEE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**223.81**

**TOTAL** 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 55 / 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City  
JanesvilleState  
WIZip Code  
53545-Purpose of Disbursement  
payroll taxes

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2922

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	7	/	2	0	0	6

Amount of Each Disbursement this Period

1132.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**B. Elaine Knowles**

Mailing Address 1717 Wesley Ave.

City  
JanesvilleState  
WIZip Code  
53545-Purpose of Disbursement  
Office supplies

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2804

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	3	/	2	0	0	6

Amount of Each Disbursement this Period

6.93

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C. Postmaster JANESVILLE, WI 53545**

Mailing Address 1818 Milton Ave

City  
JanesvilleState  
WIZip Code  
53545-Purpose of Disbursement  
Postage

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2912

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	8	/	2	0	0	6

Amount of Each Disbursement this Period

78.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

SUBTOTAL of Disbursements This Page (optional) .....

1217.00

TOTAL 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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Aristotle International, Inc.

Mailing Address 50 E Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
Tech Support (1 year)

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2870

Date of Disbursement

02 / 14 / 2006

Amount of Each Disbursement this Period

2750.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TECH SUPPORT (1 YEAR)

Full Name (Last, First, Middle Initial)

**B.** Chase Bank (Bank One JANESVILLE)

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Merch Serv Disc

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2920

Date of Disbursement

02 / 02 / 2006

Amount of Each Disbursement this Period

5.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCH SERV DISC

Full Name (Last, First, Middle Initial)

**C.** Postmaster JANESVILLE, WI 53545

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2892

Date of Disbursement

02 / 21 / 2006

Amount of Each Disbursement this Period

78.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

2833.31

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



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)  
 Ryan for Congress

Full Name (Last, First, Middle Initial)

**A. Republican Party of Wisconsin**

Mailing Address P.O. Box 31  
 148 E Johnson Street

City Madison State WI Zip Code 53701-

Purpose of Disbursement  
 State Convention room downpayme

Candidate Name

007  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2911

Date of Disbursement

03 / 03 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

STATE CONVENTION ROOM DOW-  
 NPAYME

Full Name (Last, First, Middle Initial)

**B. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
 Merch Serv Inter

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2936

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

17.28

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

MERCH SERV INTER

Full Name (Last, First, Middle Initial)

**C. Juniper Bank**

Mailing Address P.O. Box 13337

City Philadelphia State PA Zip Code 19101-3337

Purpose of Disbursement  
 Credit Card - see below

Candidate Name

007  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2837

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

367.77

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

CREDIT CARD - SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

585.05

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Cingular Wireless**

Mailing Address 32255 Northwestern Hwy. # 143

City Farmington State MI Zip Code 48334-

Purpose of Disbursement

Cell Phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2815

Date of Disbursement

01 / 06 / 2006

Amount of Each Disbursement this Period

154.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL PHONE

Full Name (Last, First, Middle Initial)

## **B. Charter Communications**

Mailing Address 5618 Odana Road

City Madison State WI Zip Code 53719-1231

Purpose of Disbursement

Computer Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2863

Date of Disbursement

02 / 07 / 2006

Amount of Each Disbursement this Period

52.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER SERVICE

Full Name (Last, First, Middle Initial)

## **C. Elaine Knowles**

Mailing Address 1717 Wesley Ave.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2916

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

862.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

1068.82

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Postmaster JANESVILLE, WI 53545

Mailing Address 1818 Milton Ave

City  
Janesville

State  
WI

Zip Code  
53545-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2865

Date of Disbursement

02 / 08 / 2006

Amount of Each Disbursement this Period

78.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**B.** LSH, Inc.

Mailing Address P.O. Box 1624

City  
Janesville

State  
WI

Zip Code  
53547-

Purpose of Disbursement  
Storage Rent

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2909

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

STORAGE RENT

Full Name (Last, First, Middle Initial)

**C.** Bob Kimball Properties

Mailing Address 917 Todd Dr.  
(Butler Terrace)

City  
Janesville

State  
WI

Zip Code  
53546-

Purpose of Disbursement  
Office Rent

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2810

Date of Disbursement

01 / 04 / 2006

Amount of Each Disbursement this Period

437.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE RENT

**SUBTOTAL** of Disbursements This Page (optional) .....

550.75

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Committee Ways & Means**

Mailing Address 1102 Longworth HOB

City Washington State DC Zip Code 20515-

Purpose of Disbursement  
Lunches for 2006

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2919

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

225.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

LUNCHES FOR 2006

Full Name (Last, First, Middle Initial)

## **B. Bob Kimball Properties**

Mailing Address 917 Todd Dr.  
(Butler Terrace)

City Janesville State WI Zip Code 53546-

Purpose of Disbursement  
Office Rent

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2856

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

437.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE RENT

Full Name (Last, First, Middle Initial)

## **C. Acuity Insurance**

Mailing Address 2800 S. Taylor Dr.  
P.O. Box 718

City Sheboygan State WI Zip Code 53082-

Purpose of Disbursement  
Workmans Comp Premium

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2901

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

783.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WORKMANS COMP PREMIUM

**SUBTOTAL** of Disbursements This Page (optional) .....

1445.75

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Ryan for Congress

<b>A. TDS Metrocom</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 1019 City Monroe State WI Zip Code 53566- Purpose of Disbursement Office Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60407.E2913 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 76.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>OFFICE PHONE</b>
<b>B. Mary Stitt</b> Full Name (Last, First, Middle Initial) Mailing Address 1478 Noridge Trail City Port Washington State WI Zip Code 53074- Purpose of Disbursement Fundraisers Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60407.E2858 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 3105.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FUNDRAISERS FEE</b>
<b>C. Townsend Group</b> Full Name (Last, First, Middle Initial) Mailing Address 429 N Saint Asaph City Alexandria State VA Zip Code 22314- Purpose of Disbursement Fundraising Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60407.E2875 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6 Amount of Each Disbursement this Period 9124.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FUNDRAISING FEE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**12305.32**

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Postmaster JANESVILLE, WI 53545

Mailing Address 1818 Milton Ave

City  
Janesville

State  
WI

Zip Code  
53545-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2835

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

39.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**B.** Jax Graphics, Inc.

Mailing Address 421 W. Mailwaukee St.

City  
Janesville

State  
WI

Zip Code  
53545-

Purpose of Disbursement  
Christmas Card Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2824

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

1590.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CHRISTMAS CARD PRINTING

Full Name (Last, First, Middle Initial)

**C.** Chase Bank (Bank One JANESVILLE)

Mailing Address 100 W. Milwaukee St.

City  
Janesville

State  
WI

Zip Code  
53545-

Purpose of Disbursement  
Bank Service Charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2887

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

4.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

BANK SERVICE CHARGE

**SUBTOTAL** of Disbursements This Page (optional) .....

1634.00

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Office Max**

Mailing Address P.O. Box 9020  
HSBC Business Solutions

City Des Moines State IA Zip Code 50368-

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2861

Date of Disbursement

02 / 03 / 2006

Amount of Each Disbursement this Period

171.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Service Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2924

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

75.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SERVICE FEE

Full Name (Last, First, Middle Initial)

## **C. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Service Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2938

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

9.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SERVICE FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

256.66

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Mary Stitt

Mailing Address 1478 Noridge Trail

City State Zip Code  
Port Washington WI 53074-

Purpose of Disbursement  
Fundraising Expenses - travel

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2813

Date of Disbursement

01 / 06 / 2006

Amount of Each Disbursement this Period

466.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING EXPENSES - TR-  
AVEL

Full Name (Last, First, Middle Initial)

**B.** Bob Kimball Properties

Mailing Address 917 Todd Dr.  
(Butler Terrace)

City State Zip Code  
Janesville WI 53546-

Purpose of Disbursement  
Office Rent

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2903

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

437.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE RENT

Full Name (Last, First, Middle Initial)

**C.** Office Max

Mailing Address P.O. Box 9020  
HSBC Business Solutions

City State Zip Code  
Des Moines IA 50368-

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2809

Date of Disbursement

01 / 04 / 2006

Amount of Each Disbursement this Period

31.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

935.31

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



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
 Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Mary Stitt

Mailing Address 1478 Noridge Trail

City Port Washington State WI Zip Code 53074-

Purpose of Disbursement  
 Fundraisers Phone Expense

Candidate Name

003  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2859

Date of Disbursement

02 / 07 / 2006

Amount of Each Disbursement this Period

167.02

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**FUNDRAISERS PHONE EXPENSE**

Full Name (Last, First, Middle Initial)

**B.** Chase Bank (Bank One JANESVILLE)

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
 Payroll Tax Deposit

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2886

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

1144.47

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**PAYROLL TAX DEPOSIT**

Full Name (Last, First, Middle Initial)

**C.** Mary Stitt

Mailing Address 1478 Noridge Trail

City Port Washington State WI Zip Code 53074-

Purpose of Disbursement  
 Fundraiser Fee

Candidate Name

003  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2900

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

3105.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**FUNDRAISER FEE**

**SUBTOTAL** of Disbursements This Page (optional) .....

4416.49

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Cindi Broydrick		<b>Transaction ID:</b> 60407.C36434IK <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 7 / 2 0 0 6</div> </div>	
Mailing Address 221 Bamboo Rd		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>435.35</div> </div>	
City West Palm Beach State FL Zip Code 33404-	Purpose of Disbursement Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) ECI		<b>Transaction ID:</b> 60407.E2808 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 0 6</div> </div>	
Mailing Address 415 Hamburg Turnpike		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>30.45</div> </div>	
City Wayne State NJ Zip Code 07470-	Purpose of Disbursement Conference Call Service Candidate Name	001 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) AICPA Political Action Committee		<b>Transaction ID:</b> 60407.C36396IK <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 7 / 2 0 0 6</div> </div>	
Mailing Address 1455 Pennsylvania Avenue NW		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>310.00</div> </div>	
City Washington State DC Zip Code 20004-	Purpose of Disbursement BREAKFAST FOOD Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**775.80**

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Elaine Knowles

Mailing Address 1717 Wesley Ave.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Travel & parking

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2805

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

58.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**TRAVEL & PARKING**

Full Name (Last, First, Middle Initial)

**B.** Payroll Data Services, LLC

Mailing Address 2418 Cross Roads Dr.

City Madison State WI Zip Code 53704-

Purpose of Disbursement  
Payroll Processing & W2 forms

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2851

Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

115.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL PROCESSING & W2  
FORMS**

Full Name (Last, First, Middle Initial)

**C.** Townsend Group

Mailing Address 429 N Saint Asaph

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
Fundraising Expenses

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2876

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

246.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**FUNDRAISING EXPENSES**

**SUBTOTAL** of Disbursements This Page (optional) .....

420.44

**TOTAL** 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. Epiphany Production Inc.**

Mailing Address 104 E. Hume Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement

Fund raising Event

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2832

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	7	/	2	0	0	6

Amount of Each Disbursement this Period

334.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUND RAISING EVENT

Full Name (Last, First, Middle Initial)

**B. Mary Stitt**

Mailing Address 1478 Noridge Trail

City Port Washington State WI Zip Code 53074-

Purpose of Disbursement

Fundraisers Fee

Candidate Name

003  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2814

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

3105.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISERS FEE

Full Name (Last, First, Middle Initial)

**C. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Merch Service Charge Card Disc

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2883

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	3	/	2	0	0	6

Amount of Each Disbursement this Period

86.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53MERCH SERVICE CHARGE CARD  
DISC

SUBTOTAL of Disbursements This Page (optional) .....

3526.03

TOTAL 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Office Max**

Mailing Address P.O. Box 9020  
HSBC Business Solutions

City Des Moines State IA Zip Code 50368-

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2914

Date of Disbursement

03 / 07 / 2006

Amount of Each Disbursement this Period

3.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Susan Jacobson**

Mailing Address 3544 N. Cedar Ridge Court

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Travel Expenses

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2906

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

250.43

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TRAVEL EXPENSES

Full Name (Last, First, Middle Initial)

## **C. Elaine Knowles**

Mailing Address 1717 Wesley Ave.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Travel & Parking

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2854

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

58.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TRAVEL & PARKING

**SUBTOTAL** of Disbursements This Page (optional) .....

312.07

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Merc Serv Interchange

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2884

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

41.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERC SERV INTERCHANGE

Full Name (Last, First, Middle Initial)

## **B. Postmaster JANESVILLE, WI 53545**

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2806

Date of Disbursement

01 / 04 / 2006

Amount of Each Disbursement this Period

38.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **C. TDS Metrocom**

Mailing Address PO Box 1019

City Monroe State WI Zip Code 53566-

Purpose of Disbursement  
Office Phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60407.E2860

Date of Disbursement

02 / 03 / 2006

Amount of Each Disbursement this Period

72.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE PHONE

**SUBTOTAL** of Disbursements This Page (optional) .....

151.61

**TOTAL** 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. SBC**

Mailing Address Bill Payment Center

City Saginaw State MI Zip Code 48663-

Purpose of Disbursement  
Phones

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2841

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	0	6

Amount of Each Disbursement this Period

66.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONES

Full Name (Last, First, Middle Initial)

**B. Postmaster JANESVILLE, WI 53545**

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2828

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	6

Amount of Each Disbursement this Period

39.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**C. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
Merch Serv Fee

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2885

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	0	6

Amount of Each Disbursement this Period

36.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCH SERV FEE

SUBTOTAL of Disbursements This Page (optional) .....

142.27

TOTAL 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

<b>A. Paul Ryan</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2194 City Janesville State WI Zip Code 53547- Purpose of Disbursement 2 Flag Donations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2873</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 34.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>2 FLAG DONATIONS</b>
<b>B. Chase Bank (Bank One JANESVILLE)</b> Full Name (Last, First, Middle Initial) Mailing Address 100 W. Milwaukee St. City Janesville State WI Zip Code 53545- Purpose of Disbursement 2005 Tax on Int. Earned Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2898</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 4077.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>2005 TAX ON INT. EARNED</b>
<b>C. Elaine Knowles</b> Full Name (Last, First, Middle Initial) Mailing Address 1717 Wesley Ave. City Janesville State WI Zip Code 53545- Purpose of Disbursement Travel & Parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2907</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 58.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL &amp; PARKING</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4169.50**

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** SCM Associates, Inc.

Mailing Address 10 Main Street, P.O. Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement

Direct Mail

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2831

Date of Disbursement

01 / 13 / 2006

Amount of Each Disbursement this Period

9401.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**DIRECT MAIL**

Full Name (Last, First, Middle Initial)

**B.** Chase Bank (Bank One JANESVILLE)

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

ATM Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2923

Date of Disbursement

02 / 14 / 2006

Amount of Each Disbursement this Period

1.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**ATM FEE**

Full Name (Last, First, Middle Initial)

**C.** Best Buy Co. Inc

Mailing Address P.O. Box 9312

City Minneapolis State MN Zip Code 55423-

Purpose of Disbursement

Printer Ink

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60407.E2818

Date of Disbursement

01 / 09 / 2006

Amount of Each Disbursement this Period

76.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PRINTER INK**

**SUBTOTAL** of Disbursements This Page (optional) .....

9478.78

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

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Ryan for Congress

<b>A. SBC</b> Full Name (Last, First, Middle Initial) Mailing Address Bill Payment Center City Saginaw State MI Zip Code 48663- Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60407.E2864 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 6</div> </div> Amount of Each Disbursement this Period <div>136.84</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PHONE SERVICE</b>
<b>B. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address 2900 Deerfield Dr. Suite 5 City Janesville State WI Zip Code 53546- Purpose of Disbursement Fax Machine for Home Office Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60407.E2834 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 3 / 2 0 0 6</div> </div> Amount of Each Disbursement this Period <div>185.82</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FAX MACHINE FOR HOME OFFICE</b>
<b>C. Elaine Knowles</b> Full Name (Last, First, Middle Initial) Mailing Address 1717 Wesley Ave. City Janesville State WI Zip Code 53545- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60407.E2939 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 0 6</div> </div> Amount of Each Disbursement this Period <div>862.24</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1184.90</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>

# **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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

<b>A. Paul Ryan</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2194 City Janesville State WI Zip Code 53547- Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2822</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6 Amount of Each Disbursement this Period 387.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL</b>
<b>B. Susan Jacobson</b> Full Name (Last, First, Middle Initial) Mailing Address 3544 N. Cedar Ridge Court City Janesville State WI Zip Code 53545- Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2852</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 75.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL</b>
<b>C. Davis &amp; Kuelthau, S.C.</b> Full Name (Last, First, Middle Initial) Mailing Address 111 E Kilbourn, Suite 1400 City Milwaukee State WI Zip Code 53202- Purpose of Disbursement Legal Consultation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60407.E2847</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period 120.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>LEGAL CONSULTATION</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**582.52**

**TOTAL** 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A.** E & D Water Works, Inc

Mailing Address 915 N. Parker Dr.

City  
JanesvilleState  
WIZip Code  
53545-Purpose of Disbursement  
Water & Water Cooler Rent

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2825

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	0	6

Amount of Each Disbursement this Period

40.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WATER &amp; WATER COOLER RENT

Full Name (Last, First, Middle Initial)

**B.** Elaine Knowles

Mailing Address 1717 Wesley Ave.

City  
JanesvilleState  
WIZip Code  
53545-Purpose of Disbursement  
Postage Stamps

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2853

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	6

Amount of Each Disbursement this Period

39.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE STAMPS

Full Name (Last, First, Middle Initial)

**C.** Charter Communications

Mailing Address 5618 Odana Road

City  
MadisonState  
WIZip Code  
53719-1231Purpose of Disbursement  
Computer Service

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2821

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	0	6

Amount of Each Disbursement this Period

52.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

132.35

TOTAL 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A.** Elaine Knowles

Mailing Address 1717 Wesley Ave.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2857

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

8.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Chase Bank (Bank One JANESVILLE)

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Merch Ser Disc

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2934

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

50.61

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCH SER DISC

Full Name (Last, First, Middle Initial)

**C.** Postmaster JANESVILLE, WI 53545

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2871

Date of Disbursement

02 / 14 / 2006

Amount of Each Disbursement this Period

41.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

100.33

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
 Merch Service Fee / Charge Card

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2918

Date of Disbursement

02 / 02 / 2006

Amount of Each Disbursement this Period

34.34

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**MERCH SERVICE FEE / CHARGE  
 CARD**

Full Name (Last, First, Middle Initial)

## **B. Postmaster JANESVILLE, WI 53545**

Mailing Address 1818 Milton Ave

City Janesville State WI Zip Code 53545-

Purpose of Disbursement  
 BRM Yearly Permit

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2807

Date of Disbursement

01 / 06 / 2006

Amount of Each Disbursement this Period

625.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**BRM YEARLY PERMIT**

Full Name (Last, First, Middle Initial)

## **C. The Congressional Club**

Mailing Address 2001 New Hampshire Ave NW

City Washington State DC Zip Code 20009-

Purpose of Disbursement  
 Campaign Lunch Expense

Candidate Name

007  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2866

Date of Disbursement

02 / 09 / 2006

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**CAMPAIGN LUNCH EXPENSE**

**SUBTOTAL** of Disbursements This Page (optional) .....

959.34

**TOTAL** 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Ryan for Congress

Full Name (Last, First, Middle Initial)

## **A. Cingular Wireless**

Mailing Address 32255 Northwestern Hwy. # 143

City Farmington State MI Zip Code 48334-

Purpose of Disbursement

Cell Phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2842

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

236.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL PHONE

Full Name (Last, First, Middle Initial)

## **B. Davis & Kuelthau, S.C.**

Mailing Address 111 E Kilbourn, Suite 1400

City Milwaukee State WI Zip Code 53202-

Purpose of Disbursement

Legal Consultation

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2878

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

LEGAL CONSULTATION

Full Name (Last, First, Middle Initial)

## **C. Susan Jacobson**

Mailing Address 3544 N. Cedar Ridge Court

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2803

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

254.69

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

691.51

**TOTAL** 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. Payroll Data Services, LLC**

Mailing Address 2418 Cross Roads Dr.

City Madison State WI Zip Code 53704-

Purpose of Disbursement

Payroll processing fee

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2899

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	6

Amount of Each Disbursement this Period

45.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL PROCESSING FEE

Full Name (Last, First, Middle Initial)

**B. Paul Ryan**

Mailing Address P.O. Box 2194

City Janesville State WI Zip Code 53547-

Purpose of Disbursement

Memorial Flag Gift

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2850

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	0	6

Amount of Each Disbursement this Period

48.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEMORIAL FLAG GIFT

Full Name (Last, First, Middle Initial)

**C. Susan Jacobson**

Mailing Address 3544 N. Cedar Ridge Court

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Salary

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2882

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	0	6

Amount of Each Disbursement this Period

2205.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional) .....

2298.58

TOTAL 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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A. Cingular Wireless**

Mailing Address 32255 Northwestern Hwy. # 143

City Farmington State MI Zip Code 48334-

Purpose of Disbursement

Cell Phone

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2902

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	6

Amount of Each Disbursement this Period

153.06

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL PHONE

**B. Chase Bank (Bank One JANESVILLE)**

Mailing Address 100 W. Milwaukee St.

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Merch Service Intercharge

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2921

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	0	6

Amount of Each Disbursement this Period

3.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCH SERVICE INTERCHARGE

**C. Charter Communications**

Mailing Address 5618 Odana Road

City Madison State WI Zip Code 53719-1231

Purpose of Disbursement

Computer Service

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2915

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	0	6

Amount of Each Disbursement this Period

52.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

208.79

TOTAL 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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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

Full Name (Last, First, Middle Initial)

**A.** Elaine Knowles

Mailing Address 1717 Wesley Ave.

City  
Janesville

State  
WI

Zip Code  
53545-

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2881

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	6

Amount of Each Disbursement this Period

862.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SALARY**

**SUBTOTAL** of Disbursements This Page (optional) .....

862.24

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

69287.56

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use 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 type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ryan for Congress

Full Name (Last, First, Middle Initial)

**A. American Heart Association**

Mailing Address 2850 Dairy Drive Suite 300

City Madison State WI Zip Code 53718-

Purpose of Disbursement

Donation to Charity

Candidate Name

012  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2811

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	0	6

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Pregnancy Helpline of Janesville**

Mailing Address 101 Main Street Suite 300

City Janesville State WI Zip Code 53545-

Purpose of Disbursement

Charitable Donations

Candidate Name

012  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2833

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	8	/	2	0	0	6

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. USO Operation Phone Home**

Mailing Address PO Box 96860

City Washington State DC Zip Code 20090-

Purpose of Disbursement

Donation to Charity

Candidate Name

012  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E2812

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	0	6

Amount of Each Disbursement this Period

475.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1450.00

TOTAL 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 84 / 85

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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 Congress

Full Name (Last, First, Middle Initial)

**A.** Wisconsin Womens Health Foundation

Mailing Address 2503 Todd Drive

City  
Madison

State  
WI

Zip Code  
53713-

Purpose of Disbursement  
Donation to Charity

Candidate Name

012  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60407.E2829

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	6

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

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

2450.00

**SCHEDULE D (FEC Form 3 )****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Ryan for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mary StittNature of Debt (Purpose):  
003 Fundraiser

Mailing Address 1478 Noridge Trail

City State ZIP Code  
Port Washington WI 53074-

Outstanding Balance Beginning This Period

3571.07

Transaction ID: LS60407.E2813

Amount Incurred This Period

9659.47

Payment This Period

9948.09

Outstanding Balance at Close of This Period

3282.45

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Jax Graphics, Inc.Nature of Debt (Purpose):  
001 Christmas Card Printi-  
ng

Mailing Address 421 W. Mailwaukee St.

City State ZIP Code  
Janesville WI 53545-

Outstanding Balance Beginning This Period

1590.20

Transaction ID: LS60407.E2824

Amount Incurred This Period

0.00

Payment This Period

1590.20

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
SCM Associates, Inc.Nature of Debt (Purpose):  
003 Direct Mail

Mailing Address 10 Main Street, P.O. Box 720

City State ZIP Code  
Jaffrey NH 03452-

Outstanding Balance Beginning This Period

9401.14

Transaction ID: LS60407.E2831

Amount Incurred This Period

7169.99

Payment This Period

13322.60

Outstanding Balance at Close of This Period

3248.53

**1) SUBTOTALS** This Period This Page (optional).....

6530.98

**2) TOTALS** This Period (last page this line number only).....

6530.98

**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)