

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Team Ryan**

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

**A. JOHNSON, ANN, L., ,**

Mailing Address 1220 S OCEAN BLVD

City  
PALM BEACHState  
FLZip Code  
33480-5016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYEDOccupation (for Individual)  
PSYCHIATRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M	D D	Y Y Y Y
02	28	2018

**Transaction ID : SA11A.542797**

Amount of Each Receipt this Period

150000.00

☐ Memo Item  
CONTRIBUTION

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

**B. JOHNSON, CHARLES, B., ,**

Mailing Address 1220 S OCEAN BLVD

City  
PALM BEACHState  
FLZip Code  
33480-5016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FRANKLIN RESOURCESOccupation (for Individual)  
RETIRED CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M	D D	Y Y Y Y
02	28	2018

**Transaction ID : SA11A.542798**

Amount of Each Receipt this Period

150000.00

☐ Memo Item  
CONTRIBUTION

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

**C. JOHNSON, JAMES, , ,**

Mailing Address P.O. BOX 292

City  
CHATHAMState  
NYZip Code  
12037-0292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
03	28	2018

**Transaction ID : SA11A.545504**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional).....▶

300500.00

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