

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

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

FOR LINE NUMBER: PAGE 341 OF 946

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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. KAPLAN, JOEL, D., MR.,**

Mailing Address 3809 LELAND ST

City  
CHEVY CHASE

State  
MD

Zip Code  
20815-4901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FACEBOOK

Occupation (for Individual)  
VP GLOBAL PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 18 / 2017

**Transaction ID : SA11A.531078**

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

**B. KAUFFMAN, GLORIA, , ,**

Mailing Address 2713 FROSTWOOD CIRCLE

City  
DICKINSON

State  
TX

Zip Code  
77539-4202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 31 / 2017

**Transaction ID : SA11A.526238**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

**C. KAUFFMAN, GLORIA, , ,**

Mailing Address 2713 FROSTWOOD CIRCLE

City  
DICKINSON

State  
TX

Zip Code  
77539-4202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONE

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2017

**Transaction ID : SA11A.529182**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

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

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

10200.00